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(Req	uestor's Name)	
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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

Artsy Productions USA LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Luis Valenzuela

Name of Person

Artsy Productions USA LLC

Firm/Company

9371 Fontainebleau Blvd suite I-114

Address

Miami FL 33172

City/State and Zip Code

valenzuela@artsyproductionsusa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luis Valenzuela

 $_{at}$ 305 $_{206.89.00}$

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited (A	Liability Compa Florida Limited	nny as it now appears on our records Liability Company)	<u>.</u>)		
The Articles of Organization for this Limited Lie Florida document number L1300000336	ability Company	were filed on January 02 201	13 and	i assigne	d
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liab	ility company here:			
N/A					<u></u>
The new name must be distinguishable and end wit 'L.L.C."	h the words "Lim	ited Liability Company," the designat	ion "LLC" o	r the abbr	eviation
Enter new principal offices address, if applicable:		9371 Fontainebleau Blvd Suite I-114			
Principal office address MUST BE A STREET ADDRESS)		Miami FL 33172			
·					
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		9371 Fontainebleau Blvd Suite I-114			
		Miami FL 33172			
B. If amending the registered agent and/eregistered agent and/or the new registered of	ice address her		iter the na	me of t	he new
Name of New Registered Agent:	N/A		<u> </u>		_ .
New Registered Office Address:	9371 Fonta	ninebleau Blvd Suite I-114 Enter Florida street	·	.=	·
	Miami	, Florida	33172	:	
		City	Zip (Code : ' ^s	i J a

New Registered Agent's Signature, if changing Registered Agent:

Artsy Productions USA LLC

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

······································	ion, enter change(s) here: (Attach	
<u></u>		
		
ffective date, if other than the of effective date is listed, the date	date of filing:	(optional) e than 90 days after filing.) (605.0207 (1
effective date is listed, the date	date of filing:	(optional) e than 90 days after filing.) (605.0207 (2
ffective date, if other than the of effective date is listed, the date is an annuary 6	must be specific and cannot be more	(optional) e than 90 days after filing.) (605.0207 (3
effective date is listed, the date	must be specific and cannot be more	e than 90 days after filing.) (605.0207 (3

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00